

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

\_\_\_\_\_  
Type or print name of person signing certification

Signature

Date

**PATENT APPLICATION  
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

First Applicant:	Otto Daniel DeRUNTZ	Confirmation No. 9575
Serial No.:	10/567,196	Examiner: Laura A. BOUCHELLE
Filing Date:	February 3, 2006	Group Art Unit: 3763
For:	MEDICATION DISPENSING APPARATUS WITH TRIPLE SCREW THREADS FOR MECHANICAL ADVANTAGE	
Docket No.:	X-16331	

**RESPONSE TO OFFICE ACTION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

**Introductory Comments**

In response to the Office Action dated October 5, 2006, please amend the above-identified application as follows: